

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of  
**YARIV DONDE**

Serial No: PENDING

Date Filed: HERewith

For: **10-HYDROXY-11-DIHYDROPROSTAGLANDIN  
ANALOGS AS SELECTIVE EP4 AGONISTS**

Examiner:

Group Art Unit: 1644

Confirmation No.:

Irvine, California

17497 U.S.PTO  
10/821705

**NON-PROVISIONAL PATENT APPLICATION TRANSMITTAL LETTER**

Mail Stop: Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir/Madam:

Enclosed herewith are the following documents:

- (x) Transmittal Letter – 3 pgs.
- (X) Application Data Sheet – 4 pgs.
- (x) Specification (39 pages) 25 Claims ( 9 pages); Abstract (1 page)
- (x) Drawings (- 2 - sheet)
- (x) Declaration/Power of Attorney
- (X) Assignment with Recordation Cover Sheet – 4 pgs
- ( ) Information Disclosure Statement with cited art
- (x) Return/postage paid Postcard
- (x) Express Mail Certificate No. **EV193721120US**

Dated: April 9, 2004

  
Brent A. Johnson  
Registration No. 51,851

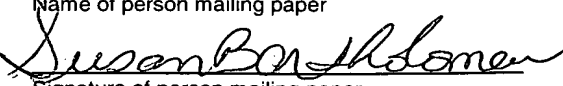
**CERTIFICATE OF EXPRESS MAIL UNDER 37 C.F.R. §1.10**

I hereby certify that this Transmittal Letter and above-identified documents are being deposited with the United States Postal Service on APRIL 9, 2004 in an envelope as "Express Mail Post Office To Addressee" mailing label number **EV193721120US** with sufficient postage for Express Mail addressed to Mail Stop: Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: April 9, 2004

Susan Bartholomew

Name of person mailing paper

  
Signature of person mailing paper

## NEW APPLICATION TRANSMITTAL FORM

To the Commissioner for Patents:

This is a Request for filing a NON-PROVISIONAL patent application under 37 CFR 1.53(b) entitled : **10-HYDROXY-11-DIHYDROPROSTAGLANDIN ANALOGS AS SELECTIVE EP4 AGONISTS** by the following named inventors:

1	Full Name of Inventor	Last Name: <b>DONDE</b>	First Name: <b>YARIV</b>	Middle Name:	
	Residence and Citizenship	City: <b>Dana Point</b>	State or Foreign Country: <b>California</b>	Country Of Citizenship: <b>U.S.A.</b>	
	Post Office Address	Post Office Address: <b>24386 Antilles Way</b>	City: <b>Dana Point</b>	State or Country: <b>California</b>	Zip Code: <b>92629</b>
2	Full Name of Inventor	Last Name:	First Name:	Middle Name:	
	Residence and Citizenship	CITY:	State or Foreign Country:	Country Of Citizenship:	
	Post Office Address	Post Office Address:	City:	State or Country:	Zip Code:
3	Full Name of Inventor	Last Name:	First Name:	Middle Name:	
	Residence and Citizenship	City:	State or Foreign Country:	Country Of Citizenship:	
	Post Office Address	Post Office Address:	City:	State or Country:	Zip Code:

(X) The Commissioner is hereby authorized to use Deposit Account Number 01-0885 for the payment of any extension fees incurred during the prosecution of this application.

(X) Enclosed is a specification of 39 pages, 25 claims ( 9 pages) and an abstract (1 page).

Oath or Declaration

(X) Enclosed is a fully executed oath or declaration.

(X) A self-addressed return postcard is enclosed for verification of receipt.

(X) The filing fee is calculated below:

FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE
Basic Fee (Large entity)			\$770.00	\$770.00
Total Claims	25 minus 20 =	-5-	\$18.00	\$90.00
Independent Claims	4 minus 3 =	-1-	\$86.00	\$86.00
If application contains any multiple dependent claims, then add			\$290.00\$	0.00
<b>TOTAL FILING FEE</b>				<b>\$946.00</b>

- (X) The Commissioner is hereby authorized to charge the filing fee and excess claim fees (including multiple dependent claim fee) as stated above to Deposit Account No. 01-0885. If this amount is incorrect, or for payment of any other fees that may be incurred as a result of this communication please use said Deposit Account. A duplicate copy of this sheet is enclosed for that purpose.
- (X) An Application Data Sheet – 4 pgs.
- (X) An Assignment with the Recordation Cover Sheet, bestowing all interest in this application to Allergan, Inc., is enclosed. – 4 pgs.
- (X) New drawing(s) are enclosed in –2- sheets.
- ( ) A Statement Pursuant to 37 CFR §1.821(f) and a labeled diskette containing the computer readable sequence listing is enclosed.
- ( ) A Statement Pursuant to 37 CFR §1.821(e), stating that the paper copy and the computer readable form are identical is filed herewith.
- ( ) A properly labeled computer readable form of the Sequence Listing accompanies this Application.
- (x) The Power of Attorney in this application is to Brent A. Johnson, Registration Number 51,851
- (x) The Power of Attorney appears in the Combined Declaration and Power of Attorney, filed herewith.

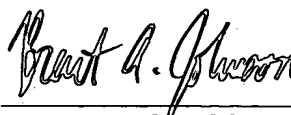
Please address all future communications to:

BRENT A. JOHNSON  
Registration No. 51,851  
ALLERGAN, INC.  
2525 Dupont Drive, T2-7H  
Irvine, CA 92612

Tel: 714-246-4348

Fax: 714-246-4249

Respectfully submitted,



Date: April , 2004

BRENT A. JOHNSON  
Registration No. 51,851  
Agent of Record